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MAY 1 0 2004

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Kimila Carraway	(Depositor's name)
limiter Cauchter	(Signature)
May 4, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/657 919	09/08/2000	Mark D. Erion	030727.0035.UTL	2510	

TITLE OF INVENTION: PRODRUGS FOR LIVER SPECIFIC DRUG DELIVERY

APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	NO	\$1330		\$0	\$1330	05/24/2004			
EXAMINER		ART UNIT		CLASS-SUBCLASS]				
LEWIS, I	1623		424-009100						
CFR 1.363). Change of correspond Address form PTO/SB/ "Fee Address" indica	ce address or indication of "F dence address (or Change of (122) attached. tion (or "Fee Address" Indica or more recent) attached. Us	Correspondence	names of up agents OR, a firm (having agent) and the	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name					
PLEASE NOTE: Unles been previously submitt (A) NAME OF ASSIGN	ed to the USPTO or is being NEE 5 Therape	elow, no assignee da submitted under sep (B)	ata will appear of parate cover. Co.) RESIDENCE:	on the patent. Inclusion of a mpletion of this form is NO (CITY and STATE OR CO	r a substitute for filing an as UNTRY) COO , CA (^			
4a. The following fee(s) and Issue Fee Publication Fee Advance Order - # o	10	4b	Payment of Fe A check in the	e(s): ne amount of the fee(s) is en credit card. Form PTO-2038	closed.	r credit any overpayment, to copy of this form).			
Director for Patents is requ	ested to apply the Issue Fee a	and Publication Fee		apply any previously paid i	ssue fee to the application id	lentified above.			
other than the applicant interest as shown by the r This collection of inform obtain or retain a benefi application. Confidential estimated to take 12 min completed application for case. Any comments of suggestions for reducing Patent and Trademark 22313-1450. DO NOT	and Publication Fee (if require a registered attorney or an ecords of the United States Plantion is required by 37 CFI by the public which is to ity is governed by 35 U.S.C. utes to complete, including form to the USPTO. Time with the amount of time you this burden, should be sent Office, U.S. Department SEND FEES OR COMPLET for Patents, Alexandria, Vi	red) will not be accept; or the assigner atent and Trademark 1.311. The informatic (and by the US 122 and 37 CFR 1.1 athering, preparing ill vary depending require to complete to the Chief Informatic, AETED FORMS TO	cepted from any see or other part of the control of	od to o) an on is the dual dd/or U.S. zinia	FMETEKI2 00000067 50 30.00 DA	2613 09657919 1330.00 OP			

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OIPER		45
MAY 1 0 2004 8	IN THE UNITED STATES PATEN	IT AND TRADEMARK OFFICE
MADEMAN re the Ap	oplication of:) Oroup Art Unit: 1623
Applicant:	Erion et al.) Examiner: Patrick Lewis
Serial No.:	09/657,919))
Filed:	September 8, 2000	,))
For: PRO DRUG DE	DRUGS FOR LIVER SPECIFIC LIVERY	,))

TRANSMITTAL LETTER

Mail Stop Issue Fee Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450

Sir:

Enclosed are the following documents:

- Part B Fee(s) Transmittal (in duplicate);
- Fee Transmittal for FY 2003 (in duplicate);
- Check for \$1,330; and
- Return Postcard;

CERTIFICATE OF MAILING (37 C.F.R. §1.8a)

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	Kimila Carraway						
	Name of Person Maining Paper						
May 4, 2004	Lmile Caudillity						
Date of Deposit	Signature of Person Mailing Paper						
SAN /89370.1							
	V						

The Commissioner is authorized to charge any fee required, or to credit any overpayment, to our Deposit Account No. 50-2613.

Respectfully submitted,

Dated: 5 | 4 | 09

By:

Diana L. Bush, Ph.D., Esq.

Reg. No. 51,109

PAUL, HASTINGS, JANOFSKY & WALKER LLP

3579 Valley Centre Drive San Diego, CA 92130-2081 Phone: (858) 720-2500

Fax:

(858) 720-2555

Date May 4, 2004

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er the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known 09/657,919 **Application Number** Filing Date September 8, 2000 for FY 2004 First Named Inventor Erion et al. Effective 01/01/2003. Patent fees are subject to annual revision. **Examiner Name** Patrick Lewis Applicant claims small entity status. See 37 CFR 1.27 1623

Art Unit

TOTAL AMOUNT OF PAYMENT (\$)1,076.00 Attorney Docket No. 45198.00035.UTL											
METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued)						ON (continued)					
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☑ Deposit Account:				Large	Equity	Small	Equity				
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Account	50-2613				Code	(\$)	Code	(\$)		·	Fee Paid
Number L]	1051	130	2051	65	Surcharge – late	filing fee or oath	
Deposit Account Name	Paul, Hastings,	Janofsky & W	Valker LLP		1052	50	2052	25	sheet	provisional fee or cover	
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	dditional fee(s) during				1804	920*	1804	920*	Requesting publi Examiner action	cation of SIR prior to	
	indicated below, exce tified deposit account.		fee		1805	1,840*	1805	1,840*	Requesting publi action	cation of SIR after Examiner	
FEE CALCULA	TION				1251	110	2251	55	Extension for rep	ly within first month	
1. BASIC FIL	ING FEE				1252	420	2252	210	Extension for rep	ly within second month	
Large Entity	Small Entity			į	1253	950	2253	475	Extension for rep	ly within third month	
Fee Fee (\$)	Fee Fee (\$)	Fee Description	n Fee P	aid	1254	1,480	2254	740	Extension for rep	ly within fourth month	
1001 750	2001 375	Utility filing fee			1255	2,010	2255	1 005	Extension for ren	ly within fifth month	<u> </u>
1002 330	2002 165	Design filing fe			1401	330	2401	165		y wami marmonar	
1003 520	2003 260	Plant filing fee			1402	330	2402	165		upport of an appeal	
1004 750	2004 375	Reissue filing fo	ee		1403	290	2403	145			
1005 160 2005 80 Provisional filing fee				1451	1,510	1451	1,510	•	e a public use proceeding		
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2. EXTRA CL	AIM FEES FOR U				1453	1,330	2453	665	Petition to revive	- unintentional	
			e from								
	Extra	Claims belo	ow F	ee Paid	1501	1,330	2501	665	Utility issue fee (d	or reissue)	1,330.00
Total Claims	-20**=	x [= [1502	480	2502	240	Design issue fee		
Independent Claims	- 3**=	x	=		1503	640	2503	320	Plant issue fee		
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Fee Fee	Fee Fee	Fee Description	1		1806	180	1806	180		formation Disclosure Stmt	
Code (\$) 1202 18	Code (\$) 2202 9	Claims in excess	-		8021	40	8021	40		patent assignment per	
1201 86	2201 43	Independent claims in excess of 3			1809	770	2809	385	property (times n	umber of properties) on after final rejection (37	<u> </u>
1203 290	2203 145	Multiple dependent claim, if not paid			1810	770	2810	385	CFR 1.129(a)) For each addition	al invention to be examined	
1204 86	2204 43	** Reissue independent claims			1801	770	2801	385	(37 CFR 1.129(b) Request for Cont)) inued Examination (RCE)	
1205 18	2205 9	over original patent ** Reissue claims in excess of 20 and over original patent			1802	900	1802	900	Request for expe	dited examination of a	
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** or number previously paid, if greater; For Reissues, see above.							ng Fee F	Paid SUBT	OTAL (3) (\$) 1,	330.00	
SUBMITTED BY (Complete (if applicable)											
		- :		Registra	tion No				Comp		
Name (Print/Type) Diana L. Bush			/Attornou		51,	109			Telephone 858-720-2885	

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